## **NEIGHBORHOOD WATCH ATTENDANCE SHEET**

FOR OFFICE USE ONLY

**Date Received** 

IJ Entered in database IJ Entered on worksheet District

Captain	Address	Zip	Phone	
Hundred Block	ndred Block Type of Event		Date	
# of Homes in Neighborhood Watch	Homes Attended	1st Meeting of year	2nd Meeting of year	
+ To receive credit for this meeting, return the	nis sheet to Maricopa Police Dept., Neighbo	rhood Watch Office, 45145 W	/. Madison P.O.	
Box 610 Maricopa, AZ 85239; or fax to us	at (520) 316-6888, within 4 weeks after activ	rity/meeting.		
+ You must inform our office of any captain/o	co-captain/assistant captain changes in order	to keep your Neighborhood V	Vatch current and active.	
PLEASE PRINT	PLEASE PRINT		PLEASE PRINT	
NAME	STREET ADDRESS (and E-MA	AIL ADDRESS optional)	(optional) HOME PHONE	

## PLEASE PRINT PLEASE PRINT PLEASE PRINT

NAME	ADDRESS	(optional) HOME PHONE